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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of:

PAULINE SAI-FUN YEUNG

Application No.: 09/544,865

Filing Date: April 7, 2000

For: ISOCHRONOUS QUEUE AND BUFFER  
MANAGEMENT

Art Group: 2668

US PATENT & TRADEMARK  
OFFICE

Examiner: Steven Blount

Mail Stop 16  
Director of the US Patent and Trademark Office  
P.O. Box 1450  
Alexandria, VA 22313-1450

**REQUEST FOR REFUND  
(IMPROPER CHARGE OF DEPOSIT ACCOUNT)**

**I. REFUND REQUEST**

This is a request for refund, with respect to the charge to Deposit Account 02-2666, shown on the statement dated , for the above-identified

application.  
 patent

*(check the following, if desired, and supply copy of statement)*

A copy of the monthly statement, in which the error referred to occurs, accompanies this request.

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## **II. FEES CHARGED FOR WHICH REFUND REQUESTED**

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**AMOUNT OF  
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**Filing fee**

Surcharge for filing the basic filing fee on a date later than the filing date of the application (37 C.F.R. 1.16(e))

Surcharge for filing the oath or declaration on a date later than the filing date of the application  
(37 C.F.R. 1.16(e))

Extension of term

first month

second month

third month

fourth month

fifth month

Excess claims

Issue fee

Petition fee

Patent maintenance fee

first maintenance fee

second maintenance fee

third maintenance fee

Patent maintenance fee surcharge

Other Extra Independent Claim \_\_\_\_\_

**TOTAL REFUND REQUESTED** **200.00**

### **III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR**

On November 9, 2006, a \$200.00 fee was authorized payment for one (1) extra independent claim. The United States Patent and Trademark Office accidentally charged an additional \$200.00 fee on November 21, 2006 without justification.

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Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date: January 24, 2006

Thomas Coester  
Thomas M. Coester, Reg. No. 39,637

12400 Wilshire Boulevard, 7th Floor  
Los Angeles, CA 90025  
Telephone: (310) 207-3800

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Susan M. Barlette 01/24/06  
Susan M. Barlette Date

Deposit Account Statement

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Deposit Account Statement

**Requested Statement Month:** November 2005  
**Deposit Account Number:** 022666  
**Name:** BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP  
**Attention:** ROCHELLE SILAS  
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11/03/05 04509.P010	09544865	billed	04509.P010	1201	\$200.00	
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## TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

Application No.	09/544,865		
Filing Date	April 7, 2000		
First Named Inventor	Pauline Sai-Fun Yeung		
Art Unit	2668		
Examiner Name	Steven Blount		
Total Number of Pages in This Submission	6	Attorney Docket Number	4509P010

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Response <ul style="list-style-type: none"> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> </ul> <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <ul style="list-style-type: none"> <li><input type="checkbox"/> Basic Filing Fee</li> <li><input type="checkbox"/> Declaration/POA</li> </ul> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">             -Return Receipt Postcard (1)              -Request For Refund (3 pgs)              -Copy of Monthly Statement (1 pg)           </div>
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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Thomas M. Coester, Reg. No. 39,637  BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP		
Signature			
Date	January 24, 2006		

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